

EXHIBIT "C"

FMCSA Motor Carrier

USDOT Number: 31120

Docket Number: MC112107

Legal Name: NEW ENGLAND MOTOR FREIGHT, INC.

DBA (Doing-Business-As) Name

THIS ENTITY HAS A PENDING INSURANCE CANCELLATION.



Addresses

Business Address: 1-71 NORTH AVENUE EAST
ELIZABETH, NJ 07201-2936

Business Phone: (201) 965-0100 Business Fax: Fax: (908) 351-0153

Mail Address:

Mail Phone:

Mail Fax:

Undeliverable Mail: NO

Authorities:

Common Authority: ACTIVE

Application Pending: NO

Contract Authority: ACTIVE

Application Pending: NO

Broker Authority: NONE

Application Pending: NO

Property: YES

Passenger: NO

Household Goods: NO

Private: NO

Enterprise: NO

Insurance Requirements:

BIPD Exempt: NO BIPD Waiver: NO BIPD Required: \$1,000,000 BIPD on File: \$1,000,000

Cargo Exempt: NO Cargo Required: NO Cargo on File: NO

BOC-3: YES Bond Required: NO Bond on File: NO

Blanket Company: UNITED STATES CORPORATION COMPANY

Comments: MC-112107-18X, SUPERSEDES MC-112107-1,6,10, AND 11, ALSO MC-100297 SUB-1.ACQUIRED IN MC-F 13615 SERVED 9-2-81 FILED FOR GENERAL COMMODITY AUTH. IN 48 STATES IN SUB 21

Active/Pending Insurance:

Form: 82	Type: BIPD	Posted Date: 04/10/2018
Policy/Surety Number: 603-1006011	Coverage From:	\$0 To: \$0
Effective Date: 04/10/2018	Cancellation Date: 04/10/2019	

Insurance Carrier: UNITED STATES FIRE INSURANCE CO.

Attn: TO REPORT A CLAIM CALL 888-890-1500

Address: 305 MADISON AVE.

MORRISTOWN, NJ 07962-1973 US

Telephone: (973) 490 - 6000 Fax: (973) 490 - 6448

Rejected Insurances:

Form:	Type:	Coverage From:	\$0 To: \$0
Policy/Surety Number:		Rejected:	
Received:			
Rejected Reason:			

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Insurance History:

Form: 91X	Type: BIPD/Primary		
Policy/Surety Number: CA118-64-44 RA	Coverage From	\$0	To: \$2,000,000
Effective Date From: 08/01/1991	To: 02/10/2002	Disposition: Replaced	

Insurance Carrier: NATIONAL UNION FIRE INS. CO. OF PITSBGH. PA
Attn: AIG GLOBAL CASUALTY-MILTON WEST
Address: 503 CARR RD, 3RD FLOOR
WILMINGTON, DE 19809 US
Telephone: (888) 609 - 7046 Fax: (302) 830 - 4533

Form: 91X	Type: BIPD/Primary		
Policy/Surety Number: NKC013347800	Coverage From	\$0	To: \$1,000,000
Effective Date From: 12/15/1996	To: 05/26/1999	Disposition: Cancelled	

Insurance Carrier: RELIANCE NATIONAL INDEMNITY COMPANY
Attn: SUSAN STEWARD
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: Fax:

Form: 91X	Type: BIPD/Primary		
Policy/Surety Number: NKC013347800	Coverage From	\$0	To: \$1,000,000
Effective Date From: 12/15/1996	To: 05/26/1999	Disposition: Replaced	

Insurance Carrier: RELIANCE NATIONAL INDEMNITY COMPANY
Attn: SUSAN STEWARD
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: Fax:

Form: 91X	Type: BIPD/Primary		
Policy/Surety Number: NKC0133478	Coverage From	\$0	To: \$1,000,000
Effective Date From: 12/15/1996	To: 05/26/1999	Disposition: Cancelled	

Insurance Carrier: RELIANCE NATIONAL INSURANCE COMPANY
Attn: ATTN: ALEX GARGANO
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: (212) 858 - 3657 Fax: (212) 858 - 4858

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Insurance History:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: NKC013347800	Coverage From	\$0	To:	\$1,000,000
Effective Date From: 12/15/1996	To: 12/15/1996	Disposition: Replaced		

Insurance Carrier: RELIANCE NATIONAL INDEMNITY COMPANY
Attn: SUSAN STEWARD
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: Fax:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: NKC0133478	Coverage From	\$0	To:	\$1,000,000
Effective Date From: 12/15/1996	To: 12/15/1996	Disposition: Replaced		

Insurance Carrier: RELIANCE NATIONAL INSURANCE COMPANY
Attn: ATTN: ALEX GARGANO
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: (212) 858 - 3657 Fax: (212) 858 - 4858

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: NKC013347800	Coverage From	\$0	To:	\$1,000,000
Effective Date From: 05/26/1999	To: 11/09/1999	Disposition: Cancelled		

Insurance Carrier: RELIANCE NATIONAL INDEMNITY COMPANY
Attn: SUSAN STEWARD
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: Fax:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: NKC013347800	Coverage From	\$0	To:	\$1,000,000
Effective Date From: 05/26/1999	To: 05/26/1999	Disposition: Replaced		

Insurance Carrier: RELIANCE NATIONAL INDEMNITY COMPANY
Attn: SUSAN STEWARD
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: Fax:

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Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: NKC013347800	Coverage From	\$0	To:	\$1,000,000
Effective Date From: 05/26/1999	To: 05/26/1999	Disposition: Replaced		

Insurance Carrier: RELIANCE NATIONAL INDEMNITY COMPANY
Attn: SUSAN STEWARD
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: Fax:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: NKC013347800	Coverage From	\$0	To:	\$1,000,000
Effective Date From: 05/26/1999	To: 05/26/1999	Disposition: Replaced		

Insurance Carrier: RELIANCE NATIONAL INDEMNITY COMPANY
Attn: SUSAN STEWARD
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: Fax:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: NKC013347800	Coverage From	\$0	To:	\$1,000,000
Effective Date From: 05/26/1999	To: 05/26/1999	Disposition: Replaced		

Insurance Carrier: RELIANCE NATIONAL INDEMNITY COMPANY
Attn: SUSAN STEWARD
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: Fax:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: NKC013347800	Coverage From	\$0	To:	\$1,000,000
Effective Date From: 05/26/1999	To: 05/26/1999	Disposition: Replaced		

Insurance Carrier: RELIANCE NATIONAL INDEMNITY COMPANY
Attn: SUSAN STEWARD
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: Fax:

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Insurance History:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: NKA0158201	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 08/15/1999	To: 02/10/2002	Disposition: Replaced		

Insurance Carrier: RELIANCE NATIONAL INDEMNITY COMPANY
Attn: SUSAN STEWARD
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: Fax:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: NKA0158201	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 08/15/1999	To: 08/15/1999	Disposition: Replaced		

Insurance Carrier: RELIANCE NATIONAL INDEMNITY COMPANY
Attn: SUSAN STEWARD
Address: 77 WATER STREET
NEW YORK, NY 10005 US
Telephone: Fax:

Form: 82	Type: BIPD			
Policy/Surety Number: B-11550	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 02/10/2002	To: 05/07/2006	Disposition: Cancelled		

Insurance Carrier: PROTECTIVE INSURANCE CO.
Attn:
Address: 111 CONGRESSIONAL BOULEVARD
CARMEL, IN 46032 US
Telephone: (317) 636 - 9800 Fax:

Form: 82	Type: BIPD			
Policy/Surety Number: B-11550	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 02/10/2002	To: 04/10/2006	Disposition: Replaced		

Insurance Carrier: PROTECTIVE INSURANCE CO.
Attn:
Address: 111 CONGRESSIONAL BOULEVARD
CARMEL, IN 46032 US
Telephone: (317) 636 - 9800 Fax:

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Insurance History:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: D001A00300	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 04/10/2006	To: 04/10/2007	Disposition: Replaced		

Insurance Carrier: DISCOVER PROPERTY & CASUALTY INSURANCE CO.

Attn:

Address: ONE TOWER SQUARE, 5GS
HARTFORD, CT 06183 US

Telephone: (866) 657 - 2827 Fax:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: D001A00323	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 04/10/2007	To: 04/10/2008	Disposition: Replaced		

Insurance Carrier: DISCOVER PROPERTY & CASUALTY INSURANCE CO.

Attn:

Address: ONE TOWER SQUARE, 5GS
HARTFORD, CT 06183 US

Telephone: (866) 657 - 2827 Fax:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: D001A00349	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 04/10/2008	To: 04/10/2009	Disposition: Replaced		

Insurance Carrier: DISCOVER PROPERTY & CASUALTY INSURANCE CO.

Attn:

Address: ONE TOWER SQUARE, 5GS
HARTFORD, CT 06183 US

Telephone: (866) 657 - 2827 Fax:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: D001A00365	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 04/10/2009	To: 04/10/2010	Disposition: Replaced		

Insurance Carrier: DISCOVER PROPERTY & CASUALTY INSURANCE CO.

Attn:

Address: ONE TOWER SQUARE, 5GS
HARTFORD, CT 06183 US

Telephone: (866) 657 - 2827 Fax:

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Insurance History:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: D001A00384	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 04/10/2010	To: 04/10/2011	Disposition: Replaced		

Insurance Carrier: DISCOVER PROPERTY & CASUALTY INSURANCE CO.

Attn:

Address: ONE TOWER SQUARE, 5GS
HARTFORD, CT 06183 US

Telephone: (866) 657 - 2827 Fax:

Form: 91X	Type: BIPD/Primary			
Policy/Surety Number: 840470M3711TCT11	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 04/10/2011	To: 04/10/2012	Disposition: Replaced		

Insurance Carrier: THE TRAVELERS INDEMNITY CO. OF CONNECTICUT

Attn: PLEASE CONTACT YOU LOCAL AGENT

Address: 1 TOWER SQUARE - 5GS
HARTFORD, CT 06183 US

Telephone: (860) 277 - 2682 Fax: (860) 277 - 3674

Form: 82	Type: BIPD			
Policy/Surety Number: B-13114	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 04/10/2012	To: 05/04/2018	Disposition: Cancelled		

Insurance Carrier: PROTECTIVE INSURANCE CO.

Attn:

Address: 111 CONGRESSIONAL BOULEVARD
CARMEL, IN 46032 US

Telephone: (317) 636 - 9800 Fax:

Form: 82	Type: BIPD			
Policy/Surety Number: B-13114	Coverage From	\$0	To: \$1,000,000	
Effective Date From: 04/10/2012	To: 04/10/2018	Disposition: Replaced		

Insurance Carrier: PROTECTIVE INSURANCE CO.

Attn:

Address: 111 CONGRESSIONAL BOULEVARD
CARMEL, IN 46032 US

Telephone: (317) 636 - 9800 Fax:

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Insurance History:

Form: 34	Type: CARGO				
Policy/Surety Number: 3AT 586 584 00	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 06/13/1993	To: 06/13/2000	Disposition: Replaced			

Insurance Carrier: LUMBERMENS MUTUAL CASUALTY CO.
Attn: ELLEN KNAPCIK
Address: ONE KEMPER DRIVE
LONG GROVE, IL 60049 US
Telephone: (847) 320 - 4670 Fax: (847) 320 - 7170

Form: 34	Type: CARGO				
Policy/Surety Number: IMB4548993	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 06/13/2000	To: 07/20/2005	Disposition: Cancelled			

Insurance Carrier: NATIONAL UNION FIRE INS. CO. OF PITSBGH. PA
Attn: AIG GLOBAL CASUALTY-MILTON WEST
Address: 503 CARR RD, 3RD FLOOR
WILMINGTON, DE 19809 US
Telephone: (888) 609 - 7046 Fax: (302) 830 - 4533

Form: 34	Type: CARGO				
Policy/Surety Number: 7474811	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 06/13/2005	To: 06/15/2006	Disposition: Replaced			

Insurance Carrier: LEXINGTON INSURANCE COMPANY
Attn: EDWARD T. FOX
Address: 100 SUMMER ST., 30THFLR
BOSTON, MA 02110-2103 US
Telephone: (617) 330 - 8261 Fax: (866) 463 - 1826

Form: 34	Type: CARGO				
Policy/Surety Number: QT-660-4273B451-TIL	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 06/15/2006	To: 08/11/2006	Disposition: Cancelled			

Insurance Carrier: TRAVELERS PROPERTY CASUALTY CO. OF AMERICA
Attn: PLEASE CONTACT YOUR LOCAL AGENT
Address: 1 TOWER SQUARE, 5GS
HARTFORD, CT 06183 US
Telephone: Fax:

FMCSA Motor Carrier

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Insurance History:

Form: 34	Type: CARGO				
Policy/Surety Number: QT-660-4273B451-TIL	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 06/15/2006	To: 07/12/2006	Disposition: Replaced			

Insurance Carrier: TRAVELERS PROPERTY CASUALTY CO. OF AMERICA
Attn: PLEASE CONTACT YOUR LOCAL AGENT
Address: 1 TOWER SQUARE, 5GS
HARTFORD, CT 06183 US
Telephone: Fax:

Form: 34	Type: CARGO				
Policy/Surety Number: QT-660-5397C742-TIL	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 06/28/2006	To: 10/24/2018	Disposition: Cancelled			

Insurance Carrier: TRAVELERS PROPERTY CASUALTY CO. OF AMERICA
Attn: PLEASE CONTACT YOUR LOCAL AGENT
Address: 1 TOWER SQUARE, 5GS
HARTFORD, CT 06183 US
Telephone: Fax:

Form: 34	Type: CARGO				
Policy/Surety Number: QT-660-5324C203-TIL	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 07/12/2006	To: 08/26/2006	Disposition: Cancelled			

Insurance Carrier: TRAVELERS PROPERTY CASUALTY CO. OF AMERICA
Attn: PLEASE CONTACT YOUR LOCAL AGENT
Address: 1 TOWER SQUARE, 5GS
HARTFORD, CT 06183 US
Telephone: Fax:

Form: 34	Type: CARGO				
Policy/Surety Number: QT-660-5324C203-TIL	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 07/12/2006	To: 06/28/2006	Disposition: Replaced			

Insurance Carrier: TRAVELERS PROPERTY CASUALTY CO. OF AMERICA
Attn: PLEASE CONTACT YOUR LOCAL AGENT
Address: 1 TOWER SQUARE, 5GS
HARTFORD, CT 06183 US
Telephone: Fax:

* If a carrier is in compliance, the amount of coverage will always be shown as the required Federal minimum (\$5,000 per vehicle, \$10,000 per occurrence for cargo insurance, \$75,000 for bond/trust fund insurance for brokers and freight forwarders). The carrier may actually have higher levels of coverage.

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Authority History:

Sub No.	Authority Type	Original Action	Disposition Action
	MOTOR PROPERTY COMMON CARRIER	REINSTATED	08/22/2005
24	MOTOR PROPERTY CONTRACT CARRIER	GRANTED	10/12/1988
20	MOTOR PROPERTY CONTRACT CARRIER	GRANTED	09/26/1986
12	MOTOR PROPERTY COMMON CARRIER	GRANTED	REVOKED 07/26/2005
21	MOTOR PROPERTY COMMON CARRIER	GRANTED	10/24/1986 REVOKED 07/26/2005
19	MOTOR PROPERTY COMMON CARRIER	GRANTED	10/01/1982 REVOKED 07/26/2005
1	MOTOR PROPERTY COMMON CARRIER	GRANTED	02/05/1982 REVOKED 07/26/2005
18	MOTOR PROPERTY COMMON CARRIER	GRANTED	09/02/1981 REVOKED 07/26/2005
17	MOTOR PROPERTY COMMON CARRIER	GRANTED	06/10/1981 REVOKED 07/26/2005
16	MOTOR PROPERTY COMMON CARRIER	GRANTED	02/13/1981 REVOKED 07/26/2005
13	MOTOR PROPERTY COMMON CARRIER	GRANTED	05/06/1981 SUPERSEDED 09/02/1981
14	MOTOR PROPERTY COMMON CARRIER	GRANTED	01/19/1981 SUPERSEDED 09/02/1981

Pending Application:

Authority Type	Filed	Status	Insurance	BOC-3

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Revocation History:

Authority Type	1st Serve Date	2nd Serve Date	Reason
COMMON	06/23/2005	07/26/2005	INVOLUNTARY REVOCATION